

Use of Online Discussion Group in HIV/AIDS Education for Pre service Teachers

Introduction

India is third in the world in terms of greatest number of people living with HIV. In 2008 UNAIDS estimated that there were 2.5 million people living with HIV in India (UNAIDS, 2008). An alarming 9 out of 10 infected people are unaware of their sero-status, increasing their risk of infecting others. Another alarming fact is the lack of awareness about HIV infection, resulting into blind myths and beliefs, creating numerous social problems, especially in the developing countries. In the absence of vaccine against HIV/AIDS, the '*social vaccine*' of mass awareness needs to be strengthened to prevent spread of the deadly virus. Teachers can constitute a large mass of this *social vaccine* as they have the ability to catch individuals "*young*".

Where 'communication' is the main issue, the ICT resources have a big role to play, to reach more teachers at a time where social education and awareness is the most important need. The role of teacher is essential in the societies that are changing quickly towards knowledge societies; the teacher thus, is the main actor, the main agent of the evolution of education. This paper exemplifies asynchronous collaborative discussion group of pre service level teachers and focuses on their co-construction of the knowledge based on shared understanding of HIV/AIDS related issues.

AIDS: a Major Challenge to Humanity

"HIV/AIDS is no longer just a public health issue, but it has become one of the most serious socio-economic and developmental concerns...we have no choice but to act with firmness, with urgency and with utmost seriousness."(3). At the economic, social, and demographic levels the AIDS epidemic is having an impact far more devastating than ever imagined. In addition to the untold grief and human misery caused by AIDS, the epidemic is wiping out development gains, decreasing life expectancy, increasing child mortality, orphaning millions, setting back the situation of women and children, and threatening to undermine national security in highly-affected societies. Because AIDS kills people in the prime of their working and parenting lives, it represents a grave threat to development. By reducing growth, weakening governance, destroying human capital, discouraging investment, and eroding productivity, AIDS erodes the foundations on which countries seek to develop their societies and improve living standards. In the worst-affected countries, the epidemic

has already reversed many of the development achievements of the past generation. Now, AIDS threatens to thwart the hopes of the next.

In order to successfully contain the spread of HIV/AIDS, this has such profound socio-economic implications, it is vital that preventive interventions be more effectively targeted. This is all the more pertinent since no amount of local resources and aid money seems enough for the enormous task at hand, not just at the national level but at the regional level as well.

Social Vaccine of Education

In the absence of vaccine against HIV/AIDS, the 'social vaccine' of mass awareness needs to be strengthened to prevent spread of the deadly virus. The meaning of 'social vaccine' is to create mass awareness to educate the people about the killer disease and on how to prevent it. *"Teachers are a window of hope in a world under siege by AIDS"*. Teachers can play an important role as a source of accurate information and skills, as adults with whom young people can discuss issues, as role models and mentors, and as advocates for healthy school environments. The HIV epidemic makes this role more critical. Teachers need to be equipped to cope with the impact of HIV and AIDS in the classroom.

In the AIDS infected world, there is a complete transformation in the role of the school. The role of education has changed, requiring teachers to take on new counselling duties. Schools are now multi-purpose developmental and welfare institutions, delivering more than formal school education as traditionally understood. Teachers in an AIDS infected world are expected not only to impart biomedical information on the disease but also to convince young people, to adopt healthy behaviour that prevents HIV/STDs/AIDS. Teachers need to involve young people in a frank and explicit discussion of sexuality, modes of transmission and methods of protection.

Teacher education institutions need to take a lead role in this transformation of the society. It is becoming imperative that teacher education institutions must prepare pre service teachers to take up new roles and responsibilities. How can we expect pre service teachers to help adolescents develop skills like self-awareness; decision making; assertiveness to resist pressures to use drugs or to have sex? How can we expect them to adopt participatory approach while handling such sensitive issues, when the approach adopted in teacher education institutions has remained lecture based, with little opportunity for pre service teachers to actively participate? Unless pre service teachers are able to be open about their experience, views and fears, it is difficult for them to see how AIDS affects human beings, and what they can do about it personally. All too often, we think of AIDS as "someone else's problem".

Teacher Empowerment through ICT

"Information and Communication Technology, or ICT, is defined as the combination of informatics technology with other related technologies, specifically

communication technology". UNESCO defines informatics as the science dealing with the design, realization, evaluation, use, and maintenance of information processing systems, including hardware, software, organizational and human aspects, and the industrial, commercial, governmental and political implications of these. In other words, ICT is an *umbrella term* that includes any communication devices like: radio, television, computers, and satellite systems as well as the various services and applications associated with them, such as videoconferencing and distance learning. The importance of ICTs lies less in the technology itself, then, in its ability to create greater access to information and communication.

ICT provides the teacher with variety of resources. ICT resources can empower teachers. As a teacher one has many tools (*Asynchronous* like discussion boards, web logs, wikis, databases, web books, websites, e mailing etc. as well as *Synchronous* tools like audio conferencing, video conferencing, chatting, instant messaging, white boarding etc) to facilitate the process of discovery and communication between learners. The participatory method like *Asynchronous Online Discussion* is especially important in dealing with such sensitive topics such as sexuality and relationships.

Online Discussion Group hivaidseduindia@yahoo.com



Most teacher education programmes provide little scope for student-teachers to reflect on their experiences and thus fail to empower teachers as agents of change (NCF 2005). Fullan (1991) noted that the current educational system leads to teacher isolation rather than collaboration and community. What is needed, he added, is to provide more interactivity and reflection on the practice of teaching. In order to provide an opportunity to students to reflect on their experiences, a yahoo group on HIV/AIDS Education in India hivaidseuindia@yahoogroups.com, was created by the author on February 11, 2007. It is an initiative in this direction to create awareness related to HIV/AIDS and to share school life experiences. Many issues are being discussed in this forum. There are 48 members in the 'Discussion Group' who are either studying or have studied at Army Institute of Education, Delhi Cantt. In this paper only **ONE** topic on HIV/AIDS along with its responses, is selected.

In a chapter entitled "Education as Conversation", Bruffee (1999) wrote that "Education initiates us into conversation, and by virtue of that conversation initiates us into thought" (p 133). Nonetheless pre service teachers and teacher educators come together (into conversations) speaking different "languages" (reflecting on their experiences) that reflect the different communities of which they are members. The pedagogical assumption that students learn by constructing knowledge through group interaction is the theoretical foundation of *Asynchronous Learning Network* (Harasim, Hiltz, Teles, & Turoff, 1995; Roblyer, Edwards, & Havriluk, 1997). An online class using asynchronous computer-mediated communication is able to engage each participant at length and in detail on the construction of common understanding. Within the online learning context, collaboration with the class using a discussion forum allows students to construct meaning from exploration of ideas put forth by classmates as well as by the instructor (Spencer, 2002). Students create knowledge by interacting, their existing knowledge and beliefs with the ideas put

Two major types of explanations for how participating in a group endeavour helps members to learn have been given (Webb 1982); socio emotional explanations and cognitive explanations.

1. Group members learn by virtue of mediating *socio emotional* variables (e.g., motivation, reduced anxiety, or satisfaction) that create an emotional or intellectual climate favourable to learning. When working with peers instead of alone (or with the instructor), anxiety and uncertainty are reduced as learners find their ways through new or complex tasks (Harasim, 1990).
2. According to Dillenbourg & Schneider (1994), several collaborative learning mechanisms directly affect cognitive processes, including: conflict or disagreement, internalization and self-explanation.

Harasim's (1990) model of conceptual change focused on collaborative learning in the online (web based) discourse environment, identifying three processes/phases describing the path from divergent to convergent thinking:

1. Idea generation
2. Idea linking
3. Intellectual convergence

Collaborative Learning in the hivaidseindia@yahoogroups.com

On 28th Feb. 2007, moderator of the group started a new topic:

TOPIC – ONE

Should safer sex information be available to 14 year old young girls? If yes, in what form? How to reach young girls of this age who do not go to schools?

Let us divide this question into three parts and see the responses of the participants

Part I - Should safer sex information be available to 14 year old young girls?

Part II – If yes, in what form?

Part III – How to reach young girls of this age who do not go to schools?

Part I - Should safer sex information be available to 14 year old young girls?

In response to the first part of the question, Pranita wrote that “Yes, the information about safe sex should reach all children (irrespective of whether they are boys or girls), for information is one of the most important things that these children lack. Ignorance might be bliss but in this world where things are changing so fast it is very difficult to remain ignorant! Sakina also showed her desire to impart sex education to girls because these days kids are exposed to a lot of information without discretion from many sources, primary being their peers who are as “knowledgeable” as them. It is better that whatever information they are receiving should be from a mature and a reliable source. They should be presented with the correct information and in the right perspective so that at least they are AWARE of the dangers which they might be facing. Geetika wrote that sex education for a 14 year old girl should be a part of the comprehensive life skills education programme. Shipra agreed with Sakina's suggestion that parents must talk to their kids but showed her concern for those parents who are so busy that they do not have any time to sit with their kids. She felt even age of 14 is too late for imparting sex education to girls as girls are experiencing puberty in class 5. Safe sex knowledge is absolutely necessary for girls of 14 etc in both rural & urban India. Moderator also agreed with Shipra and added that “Parents these days hardly have any time to sit with their kids, to listen their stories, to share their fantasies. Joint families are replaced by nuclear families. Values are changing very fast. In many cases children arrive not by choice but by chance”. According to another student, Nisha Kurian sex education must be imparted to

children below the age of 14. At the age of 5, we can start giving sex education according to their age. Pramila Ahlawat further wrote that *Yes, sex education should be imparted in schools as according to the latest census the number of school kids losing virginity is on the high therefore in order to prevent cases of STD's we need to give sex education* . Sujata Kar wrote that *yes adolescents must be given sex education because they become uncomfortable due to their biological changes and these days venereal diseases are spreading at an alarming rate especially among those belonging to 15-30 age group. Sex education programme can help youngsters*

- *to conduct themselves with dignity and restraint.*
- *To educate them as to why so much of importance is attached to socially responsible behaviour, thereby promoting emotional stability and sound character.*

Saumya loved Sujata's thought on sex education. Saumya further adds *that parents are naive and in denial about their children. They want to keep their children innocent and away from all "corruption"- read no bad words, no bad thoughts....but this is absolutely crap...it is not possible to keep them sweet and silly...they will get so much exposure as soon as they hit teens. Therefore, it is better to give them the RIGHT EDUCATION at the right time. I think sex education is as important as physics, chemistry or maths.* Suchismita Chakraborty wrote that sex education should be given to the children from 9th class onwards. Adolescents are curious to know about sex at an early age. But as parents are not interested in clarifying their doubts, so they rely on peer group. They indulge in taking drugs and even unsafe sex. Sex education programme can help us to get rid of STDs as well as AIDS. Kanchan wrote that because it is a delicate stage so students need guidance. Moderator added that as the puberty is occurring earlier, it stretches the length of the adolescent period. The onset of puberty now typically occurs between the ages of 12 and 13, as opposed to age 15½ back in 1860. Today's kids are growing faster, physically and reproductively maturing earlier, and often exceeding their parents' heights more so than ever before. Santosh was also in the favour of imparting sex education to students especially girls. Since this education only can lead to a healthy and aids free india! this is because only lack or wrong education about sex lead to these deadly sexually transmitted diseases and if v want to remove this evil precaution is very much needed. Prevention is better than cure; the saying is very true in order to remove this blot from the society.

Part II – If yes, in what form?

According to one post, it should reach children in a form that is neither too loud nor too daunting...The information should be such that it should neither motivate them to try nor it should drive them crazy in case they have been victims of sexual harassment. Sakina wrote that I think the main form in which the information can be made available to them is firstly through the parents. Parents should talk freely to their children so that they don't blindly believe their friends. The other way can be by having classes on sex education in the school.

Shipra also wants parents to have dialogues with their kids especially mothers. Ways to disseminate information is by Media, slides before movies, and through primary health centres. Women in rural India are actually quite smart, especially in female - dominated families. If a mother of a family is convinced the whole family gets convinced. Pramila as well as Saumya want teachers to be more open in discussing sex related matters with the students. Pramila also suggested some changes in the teacher education curriculum. Some classes or workshops should be organised in teacher education programmes to create awareness among pre service teachers regarding contents and strategies to be adopted for imparting sex education to the students of different age groups. Suchismita is also in the favour of giving this responsibility to teachers. She also suggested that meditation session should be included in the school curriculum along with sex education. Santosh wrote that books, internet and other media can serve the purpose of imparting education to those who have the opportunity to be in school. Anu again highlighted the role of teachers in imparting AIDS education. She gave a message:

STOP AIDS: KEEP THE PROMISE.COME FORWARD AND JOIN HANDS

Sujata shared her classroom experience where she was teaching a topic “Diseases” and was surprised to discover that students in her 8th class did not know anything about AIDS. She asked group members to suggest possible methods for discussing AIDS with students of class VII or VIII. Then one member has suggested the need for providing age appropriate information. Talking about AIDS and its mode of transmission is not appropriate at the class VI to VIII. What would be relevant is covert information. We can talk about showing empathy to sick and ailing, including AIDS patients or we can talk about issues such as rights of the children of AIDS patient etc. This way one would be obliquely bringing in the issue of AIDS and the students will be able to talk about this issue when ready.

Part III – How to reach young girls of this age who do not go to schools?

Pranita posted a message that those children who do not go to school, can be imparted sex education through posters that are visual based and should be pasted in the areas where such children live/visit. Sakina posted that as far as those girls concerned who do not go to schools, the best way is to reach out to such people, talk to them and may be organize some kind of plays or nukkad nataks pertaining to the topic. The best way is to talk about it so that the dire consequences can be prevented! Nisha wrote that girls who are not going to schools can be given them sex education through Aganwadis and M.S.S etc. Similar types of views are expressed by many other pre service teachers.

Indicators of Collaborative Learning

The analysis of the above mentioned topic shows:

- sharing of ideas, generating input, generating information, and general democratic participation (indicators of idea generating).
- Clarification and identification of different ideas, clustering into various positions (agreement/disagreement; questioning/elaboration). This is an early form of convergence, a mutual contribution to and construction of shared knowledge and understanding (Idea Linking).
- Idea structuring, understanding and consensus (Intellectual convergence).

To Sum Up

Teaching in the AIDS infected world is different from the AIDS free world. Therefore, teachers need to perform a very responsible role which is continuously evolving in the information and knowledge society. Being a teacher in the knowledge society requires new specific competencies: a teacher has to deal with new knowledge related to transmission, prevention and effects of HIV/AIDS on society and new ways for accessing this knowledge. The information revolution led by ICT has opened access to a wide range of information related to database, use of different medicines for cure, research work done in this area etc; enables teachers to be more aware by being a part of discussion forums, newsgroups etc.; allows them to be aware of the events happening simultaneously all over the world

Online discussion group can help pre service teachers and teacher educators to collaborate, share, elaborate, question, identify and clarify issues, to agree/disagree on many issues related to HIV/AIDS. This proves it beyond any doubt that if the educational experience is designed scientifically, the initial perceptions transform into a learning engagement and the engagement process results in knowledge creation, attitude change and skills transformation. In short, online discussion group can help teacher educators by 'leapfrogging' to accelerate the learning of pre service teachers, to empower them to access and to use information, which was for long a barrier.

References

1. Bruffee, K.A. (1999). Collaborative Learning: Higher Education, interdependence, and the Authority of Knowledge (2nd ed.). Baltimore: Johns Hopkins University Press.
2. (Dr. Manmohan Singh, Honorable Prime Minister of India in his address to National Youth Parliament: Special Sessions on HIV/AIDS Nov 7, 2004).

3. Fullan, M. (1991). "The Best Faculty of Education in the Country: A Fable." Submitted to the Strategic Planning Committee. Faculty of Education, University of Toronto.
4. Harasim, L., Hiltz, S.R., Teles, L., & Turoff, M. (1995). *Learning Networks: A field guide to teaching and learning online*. Cambridge, MA: MIT Press.
5. National Curriculum Framework (2005), New Delhi: NCERT.
6. Roblyer, M.D., Edwards, J., & Havriluk, M.A. (1997). Learning Theories and integration models. In M.D. Roblyer & J. Edwards (Eds.), *Integrating educational technology into teaching* (pp. 54-79). Englewood, NJ: Prentice-Hall.
7. Spencer, D.H. (2002). *A field study of use of synchronous computer-mediated communication in asynchronous learning networks*. Unpublished doctoral dissertation, NJIT/Rutgers University, Newark, NJ.
8. UNAIDS (2008) 'India: Country Situation'.
9. UNESCO (2002). *ICT in Teacher Education* Retrieved on August 10, 2009 from <http://unesdoc.unesco.org/images/0012/001295/129533e.pdf>
10. Webb, N. M. (1983). Student interaction and learning in small groups. *Review of Educational Research*, 52(3), 421-445.

